

Fast Facts

- People aged 50 and older have many of the same HIV risk factors as younger people, but may be less aware of their risk.
- People aged 55 and older accounted for one-quarter of all Americans living with HIV in 2012.
- Older Americans are more likely to be diagnosed with HIV infection later in the course of their disease.

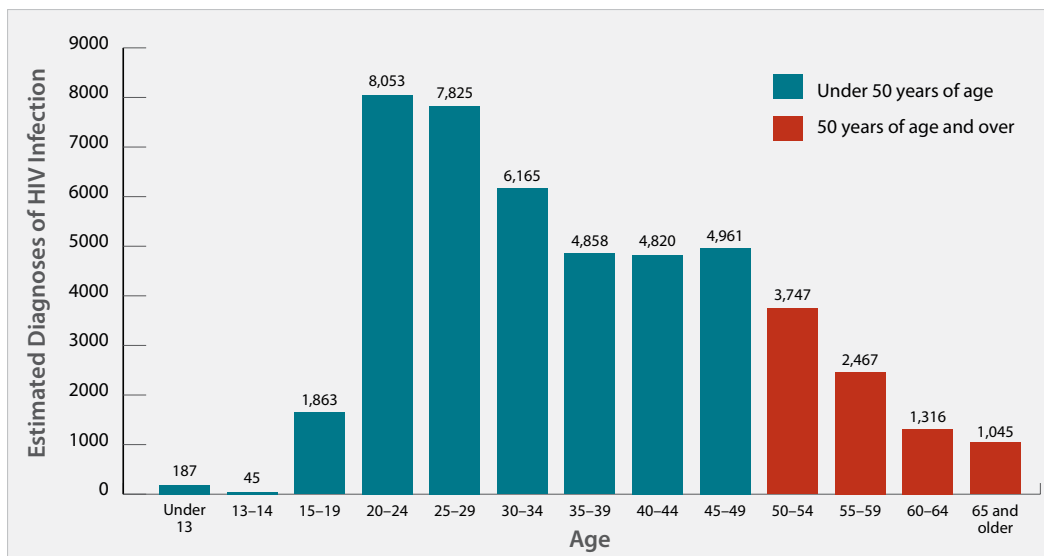
In 2012, people aged 55 and older accounted for about one-quarter (24%, 288,700) of the estimated 1.2 million people living with HIV infection in the United States.

The Numbers

HIV and AIDS Diagnoses^a and Deaths

- In 2013, people aged 50 and over accounted for 21% (8,575) of an estimated 47,352 HIV diagnoses in the United States. Of these, the largest number (44%, 3,747) were among those aged 50 to 54.
- In 2013, among persons aged 50 to 54, the estimated rate (per 100,000) of HIV diagnoses by race/ethnicity was 59.3 among African Americans/blacks, 23.3 among Hispanics/Latinos,^b and 8.7 among whites.
- In 2013, people aged 50 and older accounted for 27% (7,108) of the estimated 26,688 AIDS diagnoses in the United States.
- Of the 6,955 deaths related to AIDS in 2013, 2,588 (37%) were among people aged 55 and older.

Estimated Diagnoses of HIV Infection by Age, 2013, United States



Source: CDC. *Diagnoses of HIV infection in the United States and dependent areas, 2013*. HIV Surveillance Report 2015;25. (http://www.cdc.gov/hiv/pdf/g-l/hiv_surveillance_report_vol_25.pdf)

Prevention Challenges

Older people in the United States are more likely than younger people to be diagnosed with HIV infection late in the course of the disease, which means starting treatment late and possibly suffering more immune-system damage. This can lead to a poorer prognosis and shorter survival after an HIV diagnosis. Among people aged 20 to 24 who were diagnosed with HIV infection during 2004-2009, 99% survived more than 12 months after diagnosis, compared with an estimated 89% of people aged 50 to 54, 86% of people aged 55 to 59, 82% of people aged 60 to 64, and 73% of people aged 65 and older (for those who did not survive more than 12 months, death could have been from any cause). Late diagnoses can occur because health care providers may not always test older people for HIV infection, and older people may mistake HIV symptoms for those of normal aging and not consider HIV as a cause.

Many older people are sexually active, including those living with HIV, and may have many of the **same HIV risk factors as younger people**, including a lack of knowledge about HIV and how to prevent transmission, as well as multiple partners. Older people also face some unique issues:

- Many widowed and divorced people are dating again. They may be less aware of their risks for HIV than younger people, believing HIV is not an issue for their peer group. Thus, they may be less likely to protect themselves.
- Women who no longer worry about becoming pregnant may be less likely to use a condom and to practice safer sex. Age-related thinning and dryness of vaginal tissue may raise older women's risk for HIV infection.
- The availability of erectile dysfunction medications may facilitate sex for older men who otherwise would not have been capable of vaginal or anal intercourse.
- Although they visit their doctors more frequently, older people are less likely than younger people to discuss their sexual habits or drug use with their doctors. Also, doctors may be less likely to ask their older patients about these issues.

Stigma is a particular concern among older people because they may already face isolation due to illness or loss of family and friends. Stigma negatively affects people's quality of life, self-image, and behaviors, and may prevent them from seeking HIV care and disclosing their HIV status.

Aging with HIV infection also presents **special challenges for preventing other diseases** because older people with HIV may have an increased risk for cardiovascular disease, thin bones, and certain cancers. Older HIV patients and their care providers need to maximize prevention efforts against these conditions and remain vigilant for early signs of illness. They also need to be careful about interactions between the medications used to treat HIV and those used to treat common age-related conditions such as hypertension, diabetes, elevated cholesterol, and obesity.

What CDC Is Doing

CDC and its partners are pursuing a high-impact prevention approach to advance the goals of the National HIV/AIDS Strategy, maximize the effectiveness of current HIV prevention methods, and improve surveillance among older people in the United States. Activities include

- **Support and technical assistance** to health department and community-based organizations to deliver effective prevention and evidence-based interventions for antiretroviral therapy adherence for older Americans.
- **Act Against AIDS**, a national communications initiative that focuses on raising awareness, fighting stigma, and reducing the risk of HIV infection among at-risk populations. *Act Against AIDS* includes *Let's Stop HIV Together* (approximately 40% of campaign participants are aged 50 and older); *HIV Screening. Standard Care.*, which encourages primary care physicians to screen patients of all ages for HIV infection; and *Prevention IS Care*, which provides continuing education and materials for physicians to address the complex issues of those living with HIV infection.
- **The Comprehensive HIV Prevention Programs for Health Departments Funding Opportunity Announcement**, a 5-year, \$339 million HIV prevention initiative for health departments in states, territories, and select cities, including those serving clients at risk for HIV infection.

For additional information and resources, visit

Agency on Aging (www.aoa.gov/)

National Institutes of Health (www.nih.gov/)

Services & Advocacy for GLBT Elders (www.sageusa.org/)

Additional Resources

CDC-INFO

1-800-CDC-INFO (232-4636)
www.cdc.gov/info

CDC HIV Website

www.cdc.gov/hiv

CDC Act Against AIDS Campaign

www.cdc.gov/actagainstaids

^a HIV and AIDS diagnoses refer to the estimated number of people diagnosed with HIV infection, regardless of stage of disease at diagnosis, and the estimated number of people diagnosed with AIDS, respectively, during a given time period. The terms do not indicate when they were infected.

^b Hispanics/Latinos can be of any race.